APPLICATION FOR ADMISSIONS
ACADEMIC YEAR 2024-2025

☐Fall   ☐Spring ☐Summer

SECTION 1

Legal Name:_____

Last   First   Middle

Mailing Address:_____

PO Box or Home Delivery Address   City   State   Zip Code

Home Address:_____

Street Name, House or Apt   City   State   Zip Code

Phone: (Home)_____   (Cell)_____   (Work)_____

Date of Birth:_____*SSN/TIN:_____

Month/Day/Year

Citizenship: ☐ Citizen   ☐ Non-Citizen

Legal Gender: ☐ Male   ☐ Female

To which gender identity do you most identify? ☐ Male ☐ Female ☐ Transgender Female ☐Transgender Male
☐ Gender fluid/Genderqueer ☐ Prefer Not to Answer

Marital Status: ☐ Single   ☐ Single Parent ☐ Married   ☐Divorced   ☐ Separated

Residence

☐ Resident   ☐ CNMI Citizen   ☐ Permanent Resident Alien

☐ Military Personnel   ☐ Military Dependent   ☐ FSM Citizen

☐ International Foreign Student – I-20   ☐ Veteran

Residency

I AM A LEGAL RESIDENT OF (your legal residence is your voting residence):_____

Ethnic Origin: Are you Hispanic or Latino? ☐ YES ☐ NO – If no, choose one ethnic origin below.

☐American Indian or Alaska Native   ☐Black or African American   ☐Chamorro
☐Chinese   ☐Chuukese   ☐Filipino
☐Japanese   ☐Korean   ☐Kosraean
☐Palauan   ☐Pohnpeian   ☐Vietnamese
☐ White   ☐ Yapese   ☐Marshallese
☐Thai   ☐Other: _____   ☐Two or more races:
                                                                       _____

Personal Email Address:

Email Address:_____

Emergency Contact Information (Mandatory)

Name:_____Relationship:_____

Contact Number:_____Alternate Number:_____

Name:_____Relationship:_____

Contact Number:_____Alternate Number:_____

Please complete the following questions:

Do you require accommodations? ☐ Yes ☐ No

Is English the primary language spoken at home? ☐ Yes ☐ No _____

If you are receiving Public Assistance, please choose all that apply to you.

☐ Not receiving any public assistance ☐ American Job Center ☐ Block Grant ☐ Public Health SNAP (Foodstamp)

☐ Public Health Cash Assistance ☐ GHURA Public Housing ☐ GHURA Section 8 ☐ GHURA, Guam Trankilidat

How did you learn of GCC?

☐ GCC Website ☐ GCC Catalog ☐ High School

☐ Family/Friend ☐ Facebook/Instagram/Twitter/Internet ☐ Employer/Co-Worker

Student Type

Did at least one of your parents graduate from a 4-year college? ☐ Yes ☐ No

☐ First Time College Student – this is your first time attending any type of college **(Complete Sections 1, 2, & 6)**

☐ Returning GCC Student - you have attended GCC in the past and have taken college classes

(Complete Sections 1, 2, & 6)

☐ Transfer Student – you have attended college before, but not at GCC **(Complete Sections 1, 2, & 6)**

   What is the name of the previous college or university you attended? _____

☐ Adult High School Student / Adult Education / English As-A-Second Language **(Complete Sections 1, 3, & 6)**

☐ Apprenticeship Student **(Complete Sections 1, 4, & 6)**

☐ Boot Camp Student **(Complete Sections 1, 5, & 6)**

☐ DEAL / High School Student **(Complete Sections 1, 2, & 6)**

SECTION 2
Program Information:

I am applying for admission as a declared student in the following program:

A. **Undeclared**

   ☐ Undeclared (Please be advised that Undeclared students are NOT ELIGIBLE to utilize Federal Financial Aid and do not require the submission of high school or college transcripts unless a program of study is to be declared).

The programs listed below require the submission of one of the following documents, please note only official copies will be accepted; diplomas are not considered official documents.

- Proof of High School Graduation or equivalent. Submit an official transcript from an accredited and Department of Education recognized high school, or acceptable evidence of comparable academic achievement; e.g., satisfactory score on General Educational Development (GED®) or HI SET® tests.
- Official College transcript(s) with either the conferral of an AA/AS/BA/BS or at least 45 successfully completed post-secondary credit hours.

B. **Bachelor of Science Degree**

   ☐ Career and Technical Education (additional documentation is required for admission into this program)

C.   Associate of Arts Degrees

☐ Culinary Arts – Baking & Pastry Track	☐ Culinary Arts – Cookery Track	☐ Education
☐ Liberal Studies Track	☐ Liberal Studies – Business Track	☐ Liberal Studies – Health and Science Track
☐ Liberal Studies – Chamoru Education and Culture Track		

D.   Associate of Science Degrees

☐ Accounting	☐ Automotive Service Technology - General Service Technician Track	☐ Automotive Service Technology - Master Service Technician Track
☐ Civil Engineering Technology	☐ Computer Networking	☐ Computer Science
☐ Computer Science UOG Track	☐ CJ – Admin of Criminal Justice	☐ CJ – Law Enforcement Admin
☐ CJ – Forensic Lab Technician	☐ Early Childhood Education	☐ Foodservice Management
☐ Human Services	☐ International Hotel Management	☐ Marketing
☐ Medical Assisting	☐ Office Technology	☐ Practical Nursing
☐ Pre-Architectural Drafting	☐ Supervision & Management	☐ Surveying Technology
☐ Tourism & Travel Management	☐ Visual Communications	

E.   Certificate Programs

☐ Automotive Service Technology - General Service Technician Track	☐ Automotive Service Technology - Master Service Technician Track	☐ Automotive Service Technology - Hybrid Electric Vehicle Technician Track
☐ Computer Aided Design & Draft	☐ Computer Science	☐ Const Tech: Carpentry
☐ Const Tech: Electricity	☐ Const Tech: HVAC	☐ Const Tech: Masonry
☐ Const Tech: Plumbing	☐ Const Tech: Reinforcing Metal	☐ Const Tech: Welding
☐ CJ-Law Enforcement Admin	☐ CJ–Marine/Terrestrial Conservation	☐ Early Childhood Education
☐ Early Childhood Education - CDA Track	☐ Education	☐ Environmental Technician
☐ Family Services	☐ Medical Assisting	☐ Medium/Heavy Truck Diesel Tech
☐ Office Technology	☐ Sign Language Interpreting	☐ Supervision & Management
☐ Surveying Technology		

Highest Level of Education Completed (Please Check One)

☐None	☐High School Equivalency	☐High School Diploma	☐Some College
☐Technical/Certificate	☐AA/AS Degree	☐4 Year College	☐Graduate/Professional

School Information – Please list the high school you graduated from or last attended

Name of School:_____

Year Graduated:_____

Program Declaration Eligibility (Submission of official transcripts are required; diplomas will not be accepted)

My request to declare into a program of study is met by the following:

☐High School Graduate

Name of High School:_____   Graduation Date:_____

Other/Maiden Name (If applicable):_____

☐High School Equivalent (GED or Hi Set)

☐Completed either AA/AS/BA or BS degree*

Name of College or University:_____

Graduation Date:_____

☐Earned at least 45 semester hours with a cumulative GPA of 2.0 or higher*

Transcripts received from:

Name of College or University:_____

Name of College or University:_____

Name of College or University:_____

Failure to provide all transcripts will result in the denial of admissions into a program of study, official transcripts can be mailed or emailed to:

GUAM COMMUNITY COLLEGE
ADMISSIONS & REGISTRATION OFFICE
P.O. BOX 23069 G.M.F.
BARRIGADA, GUAM 96921-0307   gcc.registrar@guamcc.edu

SECTION 3
ADULT EDUCATION PROGRAM

SCHOOL INFORMATION – Please list the High School you last attended

Name of High School: _____

PROGRAM INFORMATION

I am applying for admission as a declared student in the Adult Education program:

☐ Adult High School Diploma Program   ☐ High School Equivalency   ☐ English-As-A-Second Language

ENROLLMENT STATUS

☐ First Time Adult Education Student   ☐ Returning Adult Education Student

TRANSCRIPTS WILL BE RECEIVED FROM:

Name of High School: _____

ATTAINABLE GOALS (Please check all that applies)

☐Enter College or Training	☐Personal Goal	☐High School Diploma
☐Get a Job	☐GED (High School Equivalency)	☐Update/Upgrade Job Skills
☐Improve Basic Skills	☐Military	☐Retain a Job
☐Improve English Skills		

STUDENT EMPLOYMENT INFORMATION

1. Are you employed? (If yes, please answer 2-4) ☐ **YES** ☐ **NO**
2. Are you working? ☐ **Full-time** ☐ **Part-time**
3. What is your employer's name? _____
4. How many hours a week do you work? _____

SECTION 4
APPRENTICESHIP PROGRAM

I am applying for admission as an Apprentice in the Apprenticeship Training Program as a(n):

_____

Employer Name: _____

SECTION 5
BOOT CAMPS

☐ Boot Camp Program: _____ **Year:** _____

BOOT CAMP QUESTIONS
Work Status:

☐Employed Full Time	☐Incarcerated	☐Retired
☐Employed Part Time	☐Non-Supervisory	☐TANF
☐Dislocated Worker	☐Unemployed	☐WIOA IB
☐Displaced Home Maker	☐Rehabilitation	☐Other: _____

How Did You Learn About GCC's Boot Camp?

☐GCC Catalog	☐Recruitment Event	☐Employer
☐GCC Employee	☐Job Fair	☐TV / Radio Ad
☐GCC Counselor / Advisor	☐Newspaper Ad	☐Mayor's Office
☐GCC Website	☐School Counselor / Advisor	☐Social Media (Facebook, WhatsApp, Instagram, Twitter, etc.)
☐Family / Friends	☐Walk-In	

SECTION 6

_____Drug and Alcohol Prevention - The Guam Community College recognizes the substantial impact that drugs and alcohol can have on every aspect of a person's life. In compliance with federal requirements, the Guam Community College is providing you with information regarding GCC's drug and alcohol policies as well as resources for the prevention of drug and alcohol abuse. GCC is committed to ensuring a healthy learning environment for our college community. To meet federal mandates, GCC will collect data on the access of the Drug and Alcohol Prevention disclosure by the GCC community. Access the link to read the full disclosure: AY 2023-2024 Annual Drug and Alcohol Abuse Disclosure

_____I authorize Guam Community College to use my image, video and/or voice to help promote GCC in print, web, radio, video, presentation and other media.

_____I understand that the information being released may include, but is not limited to directory information and non-directory information, as identified under the Family Educational Rights and Privacy Act (FERPA), within my student record. I hereby authorize Guam Community College to release this information to the third party listed above.

_____I certify that the statements made in this form are true and correct. I understand that any false information found to have been willfully given by me herein or in any supporting document may be cause for denial of admissions or immediate dismissal from Guam Community College.

Student Signature: _____Date: _____

******Admissions & Registration Use Only******

Admission into a program has been determined via the following:

☐ **High School transcripts**   ☐ **High School Equivalency transcripts**   ☐ **College/University transcripts**

Admissions Decision: ☐ Accepted   ☐ Denied _____

Authorized Signature: _____

All documents uploaded to BDMS _____
                                 DATE